

## RECEIVED AUG 1 1 2003 TC 1700

Attorney's Docket No. 019519-331

Patent

## IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

in re Pat	ent Application of	)				
Shuichi 1	KONDO	) Group Art Unit: 1752				
Applicat	ion No.: 09/977,278	) Examiner: B. Gilliam				
Filed: (	October 16, 2001	) Confirmation No.: 2067				
M.	PLATE-MAKING METHOD OF LITHOGRAPHIC PRINTING PLATE	) )				
	AMENDMENT/REPLY T	RANSMITTAL LETTER				
P.O. Bo	sioner for Patents x 1450 ria, VA 22313-1450					
Sir:	•					
Enc	losed is a reply for the above-identified pa	tent application.				
[]	A Petition for Extension of Time is also enclosed.					
[]	A Terminal Disclaimer and the [ ] \$55.0 C-F.R§-1-20(d)-are-also-enclosed.	00 (2814) [ ] \$110.00 (1814) fee due under 37				
[X] 2000-31:	Also enclosed is/are Claim for Conventing 5393	tion Priority and certified copy of JP				
[]	Small entity status is hereby claimed.					
[]	ation under 37 C.F.R. § 1.114 and enclose the fee due under 37 C.F.R. § 1.17(e).					
		iously unentered after final amendments <u>not</u> be requested based on the enclosed documents				
	[ ] Applicant(s) previously submitted requested.	, on, for which continued examination is				
	does not exceed three months from	f action by the Office until at least, which the filing of this RCE, in accordance with ed fee under 37 C.F.R. § 1.17(i) is enclosed.				

Amendment/Reply Transmittal Letter Application No. <u>09/977,278</u> Attorney's Docket No. <u>019519-331</u> Page 2

- [ ] A Request for Entry and Consideration of Submission under 37 C.F.R. § 1.129(a) (1809/2809) is also enclosed.
- [X] No additional claim fee is required.
- [ ] An additional claim fee is required, and is calculated as shown below:

	No. OF CLAIMS	HIGHEST NO. OF CLAIMS PREVIOUSLY PAID FOR	EXTRA CLAIMS	RATE	ADD'L FEE	
Total Claims		MINUS =		× \$18.00 (1202) =		
Independent Claims		MINUS =	× \$84.00 (1201) =			
If Amendment adds mu	ltiple depend	lent claims, add \$28	30.00 (1203)			
Total Claim Amendment Fee						
If small entity status is	claimed, sub	tract 50% of Total	Claim Amend	ment Fee		

[	]	A total fee in the am	ount of \$ is en	closed.
[	]	Charge \$	to Deposit Account No. 02	2-4800.

The Director is hereby authorized to charge any appropriate fees under 37 C.F.R. §§ 1.16, 1.17, 1.20(d) and 1.21 that may be required by this paper, and to credit any overpayment, to Deposit Account No. 02-4800. This paper is submitted in duplicate.

Respectfully submitted,

BURNS, DOANE, SWECKER & MATHIS, L.L.P.

Date: <u>August 8, 2003</u>

Robert G. Mukai

Registration No. 28,531

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